State of South Dakota
Statement of Financial Interest
Attorney General Appointees

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DEC 29 2020
S.D. SEC. OF STATE

To be filed with: Secretary of State, State Capitol, Pierre, SD 57501

1. Name: Krista Heeren-Graber	
2. Address: 6300 S. Venita Ave. Sioux Falls, SD 57108	
3. Appointed Office: SD Interstate Compact for Adult Offender Supervision	
4. What is your occupation or profession? Executive Director of a Nonprofit Social Services	
5. List any enterprise which accounted for more than 10 percent of, or contributed more than $2,000 to, your family's (includes spouse or minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise. SD Network Against Family Violence and Sexual Assault - Krista University of Sioux Falls - Krista Power Point Boar Stud - Stewart (spouse)	What is the nature of your immediate family's association with each? The value of the financial interest need not be reported. employment for all
6. List any enterprise in which you, your spouse, or minor children control more than 10 percent of the capital stock. Identify who has the ownership interest in each enterprise. N/A	What is the nature of your immediate family's association with each? N/A

State of South Dakota)
) SS Verification
County of Minnehaha)

I have reviewed Paragraphs 1 through 6 of the Information Regarding Statement of Financial Interest (reverse side) and my Statement of Financial Interest and certify that the information reported is a complete, true, and accurate representation of my financial interests for the preceding calendar year.

Krista Heeren-Graber

Subscribed and sworn to before me this 14 day of December, 2020.

LEXIS CRAMER NOTARY SEAL PUBLIC STATE OF SOUTH DAKOTA

Lexis Cramer
Officer Administering Oath

(SEAL)

My Commission Expires: November 2026

Executive Appointment
Senate Confirmation Information

Name: Krista Heeren-Graber	
Address: 6300 S. Venita Ave Sioux Falls, SD 57108	
Home Phone: 6052719557	Office Phone: 6057310041

1. Do you serve on any other state board or commission? (If yes, please list.)
   Advisory Board for USD Center for the Prevention of Child Maltreatment
2. Reason for vacancy:
   term expired.
3. This appointee replaces:
   myself
4. Statutory requirement for the composition of this board or commission:
   Victim Services representative
5. Statutory requirement for this appointment:
   SDCL 24-16A-1
6. Educational background. (Specify any degrees or special training you have received including the dates and institutions from which degrees have been awarded.)
   BSW - University of Sioux Falls Graduated May 1987
   MS - SDSU - Graduated December 1992
   Licensed Social Worker since 1988
7. Occupation(s) for the past ten years. Please include the name of your employer(s) and the description of your duties.
   SD Network Against Family Violence and Sexual Assault as Executive Director since 1999 - refer to CV please

8. Background and experience in the area of appointment.

Please refer to CV attached

9. Please state your interest in this appointment. For example, what would you like to see accomplished?

Please refer to CV attached

10. Are you a registered lobbyist? If so, for whom?

NO

11. Other members of the board or commission:

Doug Barthel, Mike Leidholt, Brian Zeeb, Judge Shelton,